| ✓ PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003 | | | | Application of Docket Number | | | | |
|---|---|-----------------------------------|-----------------|------------------------------|----------------|---------------------|---------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | SMALL | ENTITY | OR | OTHER SMALL | | |
| TOTAL CLAIMS | | | RAT | FEE | 1 | RATE | FEE | |
| FOR | NUMBER FILED NUMBER EXTRA | | BASIC | FEE 375.00 | OR | BASIC FEE | 750.00 | |
| TOTAL CHARGEABLE CLAIMS | minus 20= | · 6 | X\$ 9 | = | OR | X\$18= | | |
| INDEPENDENT CLAIMS | \ minus 3 = | 0 | X42: | | 1 | Yai | | |
| MULTIPLE DEPENDENT CLAIM PI | LE DEPENDENT CLAIM PRESENT | | | | OR | | · · · · · | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | +140 | | QЯ | | | |
| | | | TOTA | r 33-2 | OR | | | |
| Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY | | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Independent | HIGH NUMI PREVIC PAID | EST BER PRESENT DUSLY EXTRA | RATE | ADDI- | | RATE | ADDI- TIONAL FEE | |
| Total • 9 | Minus ++ 🗸 | 20 = / | X\$ 9 | = | б _R | X\$18= | | |
| Independent • / | Minus *** | 3 = / | X42: | | OR | X84= | | |
| FIRST PRESENTATION OF MI | ULTIPLE DEPENDENT CLAIM | | +140 | _ | OR | +280= | | |
| | ٠ | | 101 | | OR | TOTAL | 2 | |
| (Column 1) | ADDIT. F | EE | 1 | ADDIT FEE | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total | (Colur High NUM PREVIC PAID | EST BER PRESENT DUSLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total + | Minus ** | = ' | X\$ 9 | - ` | ÒR | X\$18= | | |
| independent * | Minus *** | = | X42= | | OR | X84= | 94. · | |
| FIRST PRESENTATION OF MI | ULTIPLE DEPENDENT | CLAIM | +140 | = | OR | +280= | : . | |
| | | | TO1 ADDIT, F | | OR | TOTAL ADDIT, FEE | 25 | |
| (Column 1) | (Colur | mn 2) (Column 3) | ADDIT, F | | | ADDII. FEE | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent * | HIGH NUM PREVIC PAID | BER PRESENT DUSLY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | VADDI- TIONAL L'FEE | |
| Total * | Minus ** | | X\$ 9: | | OR | X\$18= | - A | |
| Independent + | Minus *** | = | X42= | | | X84= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 13. | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. **FORM PTO-875 (Rev. 12/02) **U.S. Government Printing Office: 2003 — 498-278/59151 **Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE | | | | | | | | |